

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number 120137.473																																												
FY 2008 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)																																														
Application Number 10/646,341		Filed August 22, 2003																																												
For Managing Content Based on Reputation																																														
Art Unit 3623	Examiner William V. Saindon																																													
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 40%;"></th> <th style="text-align: center; width: 20%;"><u>Fee</u></th> <th style="text-align: center; width: 20%;"><u>Small Entity Fee</u></th> <th style="text-align: center; width: 20%;"></th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="text-align: center;">\$120</td> <td style="text-align: center;">\$60</td> <td style="text-align: center;">\$120</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: center;">\$460</td> <td style="text-align: center;">\$230</td> <td style="text-align: center;">\$_____</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: center;">\$1050</td> <td style="text-align: center;">\$525</td> <td style="text-align: center;">\$_____</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: center;">\$1640</td> <td style="text-align: center;">\$820</td> <td style="text-align: center;">\$_____</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: center;">\$2230</td> <td style="text-align: center;">\$1115</td> <td style="text-align: center;">\$_____</td> </tr> <tr> <td> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</td> <td colspan="3"></td> </tr> <tr> <td><input type="checkbox"/> A check in the amount of the fee is enclosed.</td> <td colspan="3"></td> </tr> <tr> <td><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</td> <td colspan="3"></td> </tr> <tr> <td><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</td> <td colspan="3"></td> </tr> <tr> <td><input checked="" type="checkbox"/> The Director is hereby authorized to charge the above fees, or credit any overpayment, to Deposit Account Number <u>19-1090</u>.</td> <td colspan="3"></td> </tr> </tbody> </table>				<u>Fee</u>	<u>Small Entity Fee</u>		<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$120	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$460	\$230	\$_____	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1050	\$525	\$_____	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1640	\$820	\$_____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2230	\$1115	\$_____	 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.				<input type="checkbox"/> A check in the amount of the fee is enclosed.				<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.				<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.				<input checked="" type="checkbox"/> The Director is hereby authorized to charge the above fees, or credit any overpayment, to Deposit Account Number <u>19-1090</u> .			
	<u>Fee</u>	<u>Small Entity Fee</u>																																												
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$120																																											
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$460	\$230	\$_____																																											
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1050	\$525	\$_____																																											
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1640	\$820	\$_____																																											
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2230	\$1115	\$_____																																											
 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.																																														
<input type="checkbox"/> A check in the amount of the fee is enclosed.																																														
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.																																														
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.																																														
<input checked="" type="checkbox"/> The Director is hereby authorized to charge the above fees, or credit any overpayment, to Deposit Account Number <u>19-1090</u> .																																														
<p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration No. <u>43,985</u></p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____ .</p>																																														
<hr style="border-top: 1px solid black; margin-bottom: 5px;"/> <u>/James A. D. White/</u> <hr style="border-top: 1px solid black; margin-bottom: 5px;"/> Signature <u>James A. D. White</u> <hr style="border-top: 1px solid black; margin-bottom: 5px;"/> Typed or printed name		<hr style="border-top: 1px solid black; margin-bottom: 5px;"/> May 1, 2008 <hr style="border-top: 1px solid black; margin-bottom: 5px;"/> Date <hr style="border-top: 1px solid black; margin-bottom: 5px;"/> 206-622-4900 <hr style="border-top: 1px solid black; margin-bottom: 5px;"/> Telephone Number																																												
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required.</p>																																														